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DECLARATION FOR	NITH ITY OR	Attorney Docket Num	nber P8572	.00					
DECLARATION FOR DESIGN	J	First Named Inventor	M. Hal	ler_					
PATENT APPLI		COMPLETE IF KNOWN							
(37 CFR 1.63)		Application Number	to be assigned						
Dooloration	Declaration	Filing Date	04 December 2001						
Declaration Submitted OR	Submitted after Initial Filing (surcharge	Art Unit	to be assigned						
with Initial Filing	(37 CFR 1.16 (e)) required)	Examiner Name	to be assigned						
As the below named inventor, I here	by declare that:								
My residence, mailing address, and citizenship are as stated below next to my name.									
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
PATIENT ACTIVATED ADMINISTRATION OF DRUG BOLUS FROM									
IMPLANTABLE DRUG DELIVERY SYSTEM									
<b>l</b>									
(Title of the Invention)									
the specification of which									
is attached hereto									
į.									
OR				DOT International					
was filed on (MM/DD/YYYY)	as United States Application Number or PCT International								
Application Number	and was amended on (MM/DD/YYYY) (if applicable).								
		<u> </u>							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO					

[Page 1 of 2]

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

Burden Hour Statement. This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time, you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO. Assistant Commissioner for Patents, Washington, DC 20231.

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## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to:	Customer Number or Bar Code Label			OR	xx Corre	espondence addr	ess below	
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor								
Given Name  (first and middle [if any])  Markus  Family Name Haller or Surname								
Inventor's Signature  04 December 20							ber 200	
Residence: City 2484 Webster Ave. State		S <b>State</b> M	N Country US		Citizenship US			
Mailing Address same								
City		State		ZIP		Country		
NAME OF SECOND INVENT	OR:	A petition ha	s been	filed for th	is unsigne	d inventor		
Given Name (first and middle [if any])  Family Name or Surname								
Inventor's Signature					Date			
Residence: City	Residence: City		State		Country		Citizenship	
Mailing Address								
City	City		State		ZIP		Country	
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.								